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ABSTRACT

The report surveys key elements of the child abuse and neglect statutes of the 50 states, the District of Columbia, American Samoa, Guam, Puerto Rico, and the Virgin Islands that were in effect on April 30, 1977. Considered are statutory elements of the reporting law, child protective services, and judicial proceedings in each of these 55 jurisdictions. The laws are listed in a separate section at the end of the report. (SBH)

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CHILD ABUSE AND NEGLECT

State Reporting Laws

May 1978

National Center on Child Abuse and Neglect

U.S. Children's Bureau

Administration for Children, Youth and Families

Office of Human Development Services

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I. INTRODUCTION

This report surveys key elements of the child abuse and neglect statutes of the 50 states, the District of Columbia, American Samoa, Guam, Puerto Rico and the Virgin Islands that were *in effect* on April 30, 1977. The report considers statutory elements of the reporting law, the child protective services, and the judicial proceedings in each of these 55 jurisdictions. These laws are listed in a separate section at the end of the report.

We hope this report will aid community leaders and concerned individuals who are seeking to improve state laws. We also hope the convenient summary of the present state of the law also will be useful to those who monitor trends in child abuse and neglect statutes and who wish to keep abreast of this dynamic area of the law. In this regard, similar prior studies of child abuse and neglect statutes are included in the bibliography.

The National Center on Child Abuse and Neglect wishes to acknowledge the work by personnel of Herner and Company, under the direction of Dr. Douglas E. Berninger, who prepared the report under Contract HEW-105-76-1136. James F. Fitzpatrick, J.D., tabulated the elements of the law and wrote the narrative analysis. He was assisted by Susan D. Lauscher, J.D., who collected and organized the statutes of each jurisdiction. In addition, thanks go to Sanford Fox, Professor of Law at Boston College School of Law and Consultant to the National Center, who reviewed and commented on early manuscripts of this report. Finally, major credit for monitoring the development and publishing of this manuscript goes to Joseph G. Wechsler, NCCAN Project Officer.

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II. REPORTING CHILD ABUSE AND NEGLECT

The introduction of child abuse and neglect reporting laws by state legislatures began in earnest in the early 1960's. It coincided with the first formalized medical profile of the abused or battered child and increasing community awareness of the extent of the problem. Workers dealing with families in crisis became concerned not only with identification of the problem but also with treatment and prevention of the underlying causes.

This section examines several key elements of the statutes dealing with the reporting of suspected or known cases of child abuse and neglect. These are: the purpose of the state's reporting laws, the definition of abuse and neglect, age limits of children, the required state of mind of the reporter, and who must and may report. Also discussed are immunity for reporting and other acts, abrogation of privileges, special exemptions, and the criminal and civil sanctions imposed for failure to report.

Purpose Clause

Most jurisdictions now explicitly state a purpose in their reporting law. Nearly all purpose clauses emphasize "the protection of children" rather than penal sanctions for the perpetrator of the harm.

"Purpose" clauses also are found in separate statutory provisions authorizing judicial proceedings. Many states, therefore, have more than one purpose clause. The purpose clause in most states' reporting statutes includes a provision encouraging increased reporting of suspected cases of abuse and neglect, which is the first step in providing the greatest possible protection for children whose health and welfare may be adversely affected. Many purpose clauses also state that protective services will be provided to prevent further abuse. A majority of states also declare that the purpose of state intervention will be to preserve the unity and welfare of the family whenever possible, with services provided within the family environment.

Reportable Circumstances/Definitions

What circumstances or conditions must or may be reported? Statutory definitions of child abuse and neglect and distinctions between abuse and neglect are among the most controversial issues in the child protection area. The description of circumstances requiring a report should delimit when the state will intercede into the life of the family and will act to protect children from harm. One view of the controversy involving the definitions of abuse and neglect is found in the Model Child Protection Act commentary, and reads:

> The time and effort spent in trying to distinguish between abuse and neglect serves no useful purpose. Differentiating between abuse and neglect neither establishes nor justifies service priorities; it only confuses the definition of what is reportable, thereby hindering accurate reporting, and detracting from the individualized handling of cases. A child may suffer serious or permanent harm and even death as a result of neglect. Therefore, the same reasons that justify the mandatory reporting of abuse require the mandatory reporting of child neglect.[1]

While the terms used vary from state to state, most laws contain a separate definitional section describing the circumstances requiring or permitting a report. Over the years states have broadened the concepts of reportable conditions to permit or require the reporting of some form of neglect and physical, sexual, and emotional abuse. A survey of these definitions reveals a broad list of child-caring inadequacies and maltreatment, including battering, dependency, abandonment, exploitation, overwork, emotional maltreatment, failure to provide necessities, proper supervision or care, and excessive corporal punishment.

One common generalized expression of reportable maltreatment, which appears in many statutes is: "harm or threatened harm to a child's welfare by the acts or omissions of his parent or other person responsible for his welfare," which follows the language in the Model Act definition of "abuse or neglect."[2] Another typical definition of abuse is "infliction, by other than accidental means, of physical or mental injury by a person

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[1] *Model Child Protection Act With Commentary*, draft, U.S. Department of Health, Education, and Welfare, Office of Human Development Services, Administration for Children, Youth and Families, Children's Bureau, National Center on Child Abuse and Neglect, August 1977, p. 17.

[2] Ibid., Section 4(b).

responsible for the child's welfare." The trend has been towards enlargement of the concept of reportable abuse. For example, in 1975, Louisiana specifically added sexual abuse to its reporting law, as did Vermont in the same year; in 1976, Rhode Island added mental injury to its reporting law, as did Pennsylvania in 1975. Starting in 1977, West Virginia required all injuries which were the result of abuse and neglect to be reported, not only serious ones.

Several states specify a variety of specific manifestations of abuse, such as "skin bruising, bleeding, malnutrition, failure to thrive, burns, fractures of any bone, subdural hematoma or soft tissue swelling."

This discussion of the definitions of abuse and neglect underscores a concern held by many scholars in the field. Many feel these variations from state to state lead to non-uniform reporting. Reporters, too, face a quandary because the variations and ambiguities do not pinpoint what must be reported.

All state laws are similar to the Model Act in that they do not require a reporter to know or to be certain that a child has been abuse or neglected. The degree of certainity most often expressed is: "reason to believe" or "reasonable cause to believe or suspect," a standard based on the reasonable person's convictions.

Age Limits of Reportable Children

Fifty-four jurisdictions set the age limit of reportable children at 18 years or younger, which conforms to the age limits of the Federal Child Abuse Prevention and Treatment Act of 1974.[3] New York splits the age requirement of reportable children and sets the reportable age limit at 16

REPORTING LAWS

Alabama – ALA. CODE tit. 27, §§ 20 to 25 (Supp. 1975).
Alaska – ALAS. STAT. ch. 17, §§ 47.17.010 to .070 (1971), as amended by ch. 17, §§ 47.17.030 (3), .040 (b), .070 (1) (Supp. 1976).
Arizona – ARIZ. REV. STAT. ANN. §§ 8-546 to 546.04 (1974), as amended by §§ 8-546.01 (C) (3), (D), 546.04 (A) (Supp. 1976).
Arkansas – ARK. STAT. ANN. §§ 42-807 to -818 (Supp. 1975).
California – CAL. PENAL CODE §§ 11162 (West 1970); CAL. PENAL CODE §§ 11161.5, .6, .7, .8, 11110, 11111 (West Supp. 1977).
Colorado – COLO. REV. STAT. §§ 19-10-101 to -115 (Supp. 1975).
Connecticut – CONN. GEN. STAT. ANN. § 17-38a (Supp. 1976); §§ 17-38b to -38d (1975).
Delaware – DEL. CODE tit. 16, §§ 901 to 909 (Supp. 1976).
District of Columbia – D.C. CODE ENCYCL. §§ 2-161 to -166 (1973).
Florida – FLA. STAT. ANN. § 827.07 (1975), as amended by § 827.07 (10) (Supp. 1976).
Georgia – GA. CODE ANN. § 74-111 (Supp. 1977); §§ 99-4301, -4302 (1976).
Hawaii – HAWAII REV. STAT. §§ 350-1 to -5 (1975), as amended by § 350-1 (Supp. 1975).
Idaho – IDAHO CODE §§ 16-1601, -1602, -1619, 1620, -1629 (Supp. 1976).
Illinois – ILL. ANN. STAT. ch. 23, §§ 2051 to 2061 (Smith-Hurd Supp. 1976); ch. 51, § 5.1 (Smith-Hurd Supp. 1976).
Indiana – IND. CODE ANN. §§ 12-3-4.1-1 to 6 (1973).
Iowa – IOWA CODE ANN. §§ 235A.1 to .24 (Supp. 1975).
Kansas – KAN. STAT. §§ 38-716, -719 (1973); §§ 38-717, -718, -720 to -723 (Supp. 1976).
Kentucky – KY. REV. STAT. §§ 199.011, .335, .990 (7)-(8) (1976 Acts, C. 142, Secs. 1-3); §§ 199.430, .900 (Supp. 1975).
Louisiana – LA. REV. STAT. § 14.403 A, B (1), (4), C to I (1974); § 14.403 B (2), (3) (Supp. 1976).
Maine – ME. REV. STAT. tit. 22, §§ 3851 to 3860 (Supp. 1975), as amended by tit. 22, § 3853 (Supp. (1976).
Maryland – MD. CODE ANN. Art. 27, § 35A (1976 Repl. Vol.).
Massachusetts – MASS. GEN. LAW ANN. ch. 119, §§ 51A to 52 (1975), as amended by ch. 119, §§ 51A, E, F (Supp. 1976); ch. 119, § 39A (1969); ch. 233 §§ 20, 20B (1975).
Michigan – MICH. COMP. LAWS ANN. §§ 722.621 to .636 (Supp. 1976).
Minnesota – MINN. STAT. ANN. § 626.556 (Supp. 1976).
Mississippi MISS. CODE ANN. §§ 43-21-5, -11 (Supp. 1976).
Missouri – MO. REV. STAT. §§ 210.110 to .165 (Supp. 1976).
Montana –MONT. REV. CODES ANN. §§ 10-1300, -1301, -1303 to -1308 (Supp. 1975).
Nebraska – NEB. REV. STAT. §§ 28-1501 to -1508 (1973), as amended by §§ 28-1506 to -1508 (1975).
Nevada – NEV. REV. STAT. §§ 200.501 to .508 (1973), as amended by §§ 200.501, .5011, .502, .503, .504, .5045, .508 (1975).

[3] Pub. L. No. 93-247, Jan. 31, 1974, Section 4 (b) (2).

years for abuse and under 18 years for neglect.[4]

Five jurisdictions qualify their age limit or include separate considerations. Delaware, Washington and American Samoa include mentally retarded persons, regardless of age. Ohio sets the age at under 18 years or any crippled or otherwise physically or mentally handicapped child under 21. Oregon's definition refers to unmarried persons under 18 years. Tennessee sets the age at under 18 years or persons who are reasonably presumed to be under 18 years. Texas refers to a person under 18 years who is not or has not been married or who has not had his disabilities of minority removed for general purposes.

Who Must Report

The earliest focus on mandatory reporting was directed at physicians. Their training and contact with injured children singled them out as the group most likely to detect and report child abuse and neglect. Table A shows that every jurisdiction requires physicians to report child abuse. This is mandated either by specific mention of physicians or by a more general directive, such as "practitioners of the healing arts" or "any person."

Table A illustrates which states require reports from other medical professionals, such as nurses, dentists, osteopaths and interns. In many instances, reporting laws also include non-medical professionals, such as teachers, law enforcment and child care personnel.

A comparison of several of the categories of reporters named in 1973[5] with the current figures

REPORTING LAWS *(Cont.)*

New Hampshire – N.H. REV. STAT. ANN. §§ 169:37 to 45 (Supp. 1975).
New Jersey – N.J. STAT. ANN. §§ 9:6-8.8 to .20 (1976).
New Mexico – N.M. STAT. ANN. §§ 13-14-14.1, .2 (1976).
New York – N.Y. SOC. SERV. LAW §§ 411 to 428 (McKinney 1975), as amended by § 422 (4) (Supp. 1976).
North Carolina – N.C. GEN STAT. §§ 110-116 to -122 (1975), as amended by §§ 110-117 (1), (4), -118 (d) (Supp. 1975).
North Dakota – N.D. CENT. CODE §§ 50-25.1-01 to -14 (Supp. 1975), as amended by §§ 50-25.1-02, -08 (Supp. 1977).
Ohio – OHIO REV. CODE ANN. §§ 2151.421, .99 (Page Repl. Vol. 1976).
Oklahoma – OKLA. STAT. ANN. tit. 21, §§ 845 to 848 (Supp. 1976).
Oregon – OR. REV. STAT. §§ 418.740 to .775, .990 (6)-(7) (Repl. Part 1975).
Pennsylvania – PA. STAT. ANN. tit. 11, §§ 2201 to 2224 (Supp. 1976).
Rhode Island – R.I. GEN. LAWS §§ 40-11-1 to -16 (Supp. 1976).
South Carolina – S.C. CODE ANN. ch. 9, §§ 20-9-10 to -70 (1976), as amended by § 20-9-20 (a) (Supp. 1976).
South Dakota – S.D. COMPILED LAWS ANN. §§ 26-10-1.1, -10 to 12.3, -14 (1976), as amended by § 26-10-15 (Supp. 1977).
Tennessee – TENN. CODE ANN. §§ 37-1201 to -1212 (1977 Repl. Vol.).
Texas – TEX. FAM CODE ANN. §§ 34.01 to .06 (1975), as amended by §§ 34.02, .05, .07, .08 (Supp. 1976); § 34.04 (Supp. 1976).
Utah – UTAH CODE ANN. §§ 55-16-1 to -7 (Supp. 1975); § 55-15a-26 (Repl. Vol. 1974); § 55-15b-19 (Repl. Vol. 1974).
Vermont – VT. STAT. ANN. tit. 13, §§ 1351 to 1356 (Supp. 1976).
Virginia – VA. CODE §§ 63.1-248.1 to .17 (Supp. 1976).
Washington – WASH. REV. CODE ANN. §§ 26.44.010 to .900 (Supp. 1975); § 5.60.060 (3), (4) (Supp. 1976); § 18.83.110 (Supp. 1976).
West Virginia – W. VA. CODE §§ 49-6A-1 to -10 (S.B. No. 200, April 5, 1977); § 49-7-1 (S.B. No. 200, April 5, 1977).
Wisconsin – WIS. STAT. ANN. §§ 905.04 (4) (e), .05 (1), (2), (3) (b) (1975); § 48.981 (Supp. 1976).
Wyoming – WYO. STAT. §§ 14-28.7 to .13 (Supp. 1975); § 42-19 (a), (c), (d) (Supp. 1975).
American Samoa – A.S. CODE tit. 21, ch. 29, §§ 2901 to 2914 (P.L. 15-22, February 25, 1977).
Guam – GUAM PENAL CODE §§ 273 (d), 273 (e) (Supp. 1974).
Puerto Rico – P.R. LAWS ANN. tit. 3, §§ 211 m-r (Supp. 1975), as amended by Act No. 104 of 1976, Secs. 1-8.
Virgin Islands – V.I. CODE ANN. tit. 19, §§ 171 to 176 (Supp. 1975), as amended by §§ 171 to 183 (1976 Act No. 3825, 11th Legislature, Sec. 1).

[4]In August, 1977, New York amended its reporting law to provide for a uniform age requirement of 18 years for all reportable children.

[5]V. De Francis and C.L. Lucht, *Child Abuse Legislation in the 1970's*, rev. ed., (Denver: The American Humane Association, Children's Division, 1974), p. 174.

TABLE A
WHO REPORTS

States and Territories	WHO MUST REPORT														
	Physician	Nurse	Surgeon	Osteopath	Dentist	Resident	Intern	Hospital/Institution Personnel	Practitioner of Healing Arts[1]	Chiropractor	Optometrist	Podiatrist	Pharmacist	Mental Health Professional	Coroner/Medical Examiner
Alabama	X	X	X	X	X			X		X	X	X	X	X	X
Alaska	X	X	X	X	X			X	X	X	X			X	
Arizona	X	X	X	X	X	X	X			X		X		X	X
Arkansas	X	X	X	X	X	X	X	X						X	X
California	X	X	X		X	X	X	X		X		X			
Colorado	X	X	X	X	X		X	X		X		X		X	X
Connecticut	X	X	X	X	X	X	X			X	X	X		X	X
Delaware	X	X		X	X	X	X		X					X	X
District of Columbia	X														
Florida	X	X													
Georgia	X	X		X	X	X	X					X		X	
Hawaii	X	X		X	X				X						X
Idaho	X	X				X	X								X
Illinois	X	X	X	X	X			X		X		X			X
Indiana															
Iowa	X	X	X	X	X	X	X	X	X	X	X	X		X	
Kansas		X			X	X	X		X					X	
Kentucky	X	X		X	X	X	X	X		X	X			X	X
Louisiana	X	X				X	X	X							
Maine	X	X		X	X	X	X			X		X		X	X
Maryland	X	X	X		X	X	X		X					X	
Massachusetts	X	X			X		X								X
Michigan	X	X			X										X
Minnesota								X	X					X	
Mississippi	X	X			X	X	X							X	
Missouri	X	X			X	X	X	X	X	X	X	X		X	X
Montana	X	X													
Nebraska	X	X						X							
Nevada	X	X	X	X	X	X	X	X		X	X				
New Hampshire	X	X	X	X	X	X	X	X		X	X			X	X
New Jersey															
New Mexico	X	X				X	X								
New York	X	X	X	X	X	X	X	X		X	X	X		X	X
North Carolina	X	X	X	X	X	X	X	X		X	X	X		X	X
North Dakota	X	X			X						X			X	X
Ohio	X	X	X		X	X	X					X		X	X
Oklahoma	X	X	X	X	X	X	X								
Oregon	X	X			X	X	X			X	X			X	
Pennsylvania	X	X		X	X		X	X		X	X	X		X	X
Rhode Island															
South Carolina		X				X	X		X						
South Dakota	X	X	X	X	X	X	X			X	X	X		X	X
Tennessee															
Texas															
Utah															
Vermont	X	X	X	X	X	X	X	X		X					X
Virginia		X				X	X		X					X	
Washington	X	X	X	X	X				X	X	X	X	X	X	
West Virginia					X									X	
Wisconsin	X	X	X		X			X							
Wyoming	X	X	X	X	X	X	X			X		X	X		
America Samoa	X	X	X	X	X	X	X	X		X	X	X		X	X
Guam	X	X	X	X	X				X						X
Puerto Rico	X	X			X	X	X	X	X	X			X		
Virgin Islands	X	X			X			X						X	

Numbers refer to explanatory notes in Appendix A.

TABLE A *(Continued)*

WHO REPORTS

WHO MUST REPORT														WHO MAY REPORT	
Teachers [2]	Other School Personnel	Social Services Worker	Law Enforcement Officer	Peace Officer	Police Officers	Probation Officer	Parole Officer	Religious Healing Practitioner [3]	Child Care Institution/Worker	Clergyman	Attorney	Any Other Person	Others [4]	States and Territories	Permissive Reporting
X	X	X	X	X					X				X	Alabama	●
X		X		X				X					X	Alaska	●
X	X	X		X									X	Arizona	
X	X	X	X	X					X					Arkansas	●
X	X	X						X	X	X				California	●
X	X	X						X	X				X	Colorado	●
X	X	X			X				X	X		X		Connecticut	
X	X	X										X		Delaware	
														District of Columbia	
X		X										X	X	Florida	
X	X	X	X						X					Georgia	●
X		X												Hawaii	●
X		X							X			X		Idaho	
X	X	X	X					X	X				X	Illinois	●
												X		Indiana	
X	X	X		X					X					Iowa	●
X	X	X	X											Kansas	●
X	X	X		X					X			X	X	Kentucky	
X		X										X	X	Louisiana	●
X	X	X	X					X	X					Maine	●
X	X	X	X		X	X	X						X	Maryland	
X	X	X			X	X							X	Massachusetts	●
X	X	X	X						X				X	Michigan	●
X	X	X	X						X					Minnesota	●
X	X	X	X						X	X				Mississippi	
X	X	X	X	X		X	X	X	X	X			X	Missouri	●
X		X	X								X	X		Montana	
X	X	X										X		Nebraska	
X	X	X							X	X	X			Nevada	●
X	X	X	X					X	X	X		X	X	New Hampshire	
												X		New Jersey	
X		X	X									X		New Mexico	
	X	X	X	X				X	X					New York	●
X	X	X	X					X					X	North Carolina	
X	X	X	X		X				X				X	North Dakota	●
X	X	X						X	X		X		X	Ohio	●
												X		Oklahoma	
X	X	X		X					X	X	X		X	Oregon	
X	X	X	X	X				X	X				X	Pennsylvania	●
												X		Rhode Island	
X		X										X		South Carolina	
X	X	X	X											South Dakota	●
												X		Tennessee	
												X		Texas	
												X		Utah	
					X								X	Vermont	●
X	X	X	X			X		X	X				X	Virginia	●
X	X	X						X	X				X	Washington	●
X	X	X	X	X				X	X				X	West Virginia	●
	X	X												Wisconsin	
X	X	X										X	X	Wyoming	
X	X	X	X	X				X	X					America Samoa	●
X		X												Guam	
X	X	X							X			X		Puerto Rico	
X	X	X	X	X					X				X	Virgin Islands	●

in Table A shows the extent of the trend toward expansion of the scope of those who must report. As of April, 1977, reports from teachers or other school personnel are mandated by 46 jurisdictions. Thirty-one states required their reports in 1973. Today 46 jurisdictions require reports of harm from social service workers, as opposed to 32 in 1973. In 1973, nurses were required to report in 38 states. Today the figure is 46. Twenty-two states and 2 territories currently mandate reports from coroners or medical examiners. Only 8 states required coroner's reports in 1973. The requirement of reports from clergymen has expanded from 3 states to 7 and attorneys are now included in 4 reporting laws, as opposed to 2 in 1973.

Twenty jurisdictions currently mandate "any" or "any other person" to report. In addition, a variety of "other" persons, not included in the categories in Table A, are required to make reports. Arizona, Louisiana and Missouri require reports from "other person with responsibility for the care of children." Florida requires reports from "any person, including, but not limited to...employees of a public or private facility serving children." Pennsylvania's law focuses on "any person who, in the course of their [sic] employment, occupation, or practice of their profession comes into contact with children." Alabama mandates reports from "any other person called upon to render aid or medical assistance to any child"; North Carolina includes "any professional person"; Oregon speaks of "any public or private official." North Dakota, West Virginia and the Virgin Islands require reports from "any other medical profession." Ohio includes "other health care professionals." Virginia includes "any person licensed to practice medicine."

One clause, which commonly appears in the reporting laws, requires medical staff to notify the person in charge of the institution, who, in turn, is responsible for the report. This requirement follows the language in Section 5(b) of the 1977 Model Act draft and is aimed at increasing administrative accountability and the establishment of reporting and follow-up procedures. Arkansas, a typical example, reads:

> ...Whenever such person is required to report...in his capacity as a member of the staff of a medical or public or private institution, school, facility or other agency, he shall immediately notify the person in charge...or his designated agent, who shall then become responsible for making a report or cause such report to be made.
> ARK. STAT. ANN. § 42-808 (Supp. 1975)

The New York statute does not completely shift the responsibility for reporting once a staff member notifies his superior:

> ...Whenever such person is required to report under this title in his capacity as a member of the staff of a medical or other public or private institution, school, facility, or agency, he shall immediately notify the person in charge of such institution, school, facility, or agency, or his designated agent, who then also shall become responsible to report or cause reports to be made. However, nothing in this section or title is intended to require more than one report from any such institution, school or agency.
> N.Y. SOC. SERV. LAW § 413 (McKinney 1975)

Another special clause, which is gaining broad favor in state laws, requires that child fatalities due to abuse and neglect be reported to medical examiners or coroners and District Attorneys. Colorado, which closely follows the language in Section 7 of the Model Act draft, reads:

> Any person who is required...to report know or suspected child abuse or neglect shall report...immediately to a local law enforcement agency and to the appropriate medical examiner. The local law enforcement agency and the medical examiner shall report their findings to the local law enforcement agency, the district attorney, and the county department.[6]
> COLO. REV. STAT. § 19-10-105 (1) (Supp. 1975)

Who May Report

The last column in Table A shows the 28 jurisdictions which currently provide specific authorization for permissive reporting. Many states make no provision for permissive reporting because they mandate reporting by everyone.

[6]Other examples include: Arkansas, Maine, Massachusetts, Minnesota, Missouri, New York, Pennsylvania, Virginia, Washington, West Virginia and American Samoa.

Immunity for Participation in the Making of a Report

One of the eligibility criteria for state grants under the Federal Child Abuse Prevention and Treatment Act is a provision extending "immunity for persons reporting instances of child abuse and neglect from prosecution, under any state or local law, arising out of such reporting."[7] This provision serves to encourage full reporting by removing the threat of legal action from reporters, and in particular from medical professionals.

Table B illustrates the fact that all 50 states, the District of Columbia, American Samoa, Guam and Puerto Rico and the Virgin Islands grant immunity from any liability, civil or criminal, for the making of a report. This chart also reflects the fact that most jurisdictions provide immunity for participation in any judicial proceeding resulting from the report.

Table B also illustrates the fact that the majority of jurisdictions qualify their grant of immunity with the requirement that the report be made in good faith. Fifteen of these jurisdictions, however, include a presumption of the good faith of reporters. Four states specifically withhold immunity from reporters if they are charged with or suspected of abusing or neglecting a child who is the subject of a report.

Immunity for the Retention or Removal of a Child

At least 13 jurisdictions explicitly extend the grant of immunity to any person participating in the temporary removal of a child pursuant to state law.[8]

Immunity for Taking of Photographs and/or X-rays

Photographs, and especially x-rays, can be important to a diagnosis of alleged abuse or neglect and to preservation of the evidence for court action or provision of protective services. At least 10 jurisdictions grant immunity to any person participating in good faith in the taking of photographs of the areas of trauma visible on a child. Table B shows that 6 of these 10 jurisdictions also extend the immunity to those performing x-ray examinations when medically indicated.

Statutory Authority to Take Photographs and/or X-rays

Table C shows that, in addition to the specific grants of immunity discussed above, at least 16 jurisdictions include a specific authorization for some persons or any person to take, or cause to be taken, photographs or x-rays of injury to a child without parental permission. Ten of these 16 jurisdictions are those which also specifically grant immunity for the taking of photographs. Eight of the 16 jurisdictions authorizing the taking of photographs or x-rays extend this authorization to any person required to report.[9]

Table C indicates that 10 jurisdictions require the person authorized to take photographs and/or x-rays to notify the appropriate child protection service of their action or to forward any such evidence to that agency.

To encourage complete reporting and the preservation of evidence of harm, eight jurisdictions explicitly authorize that the photographs and x-rays be taken at public expense.

Abrogation of Privileged Communications

There are certain classes of communications between persons who stand in a confidential relationship with each other, which the law does not permit to be inquired into in a judicial proceeding or otherwise divulged unless the person who is sought to be protected decides otherwise (waiver). In order to make available all relevant evidence in a judicial proceeding, the laws of most jurisdictions make these legal restrictions on divulging confidential information inapplicable in child abuse and neglect cases.

Table D records the specific privileges excluded. The physician-patient privilege is explicitly ex-

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[7] Ibid., Section 4 (b)(2) (A).

[8] They are: Alabama, Arkansas, Colorado, Illinois, Michigan, Missouri, New Jersey, New York, Pennsylvania, Virginia, Washington, American Samoa and the Virgin Islands.

[9] They are: Arkansas, Iowa, New York, Ohio, Pennsylvania, West Virginia, American Samoa and the Virgin Islands. The breakdown of authorization for the other eight is: Arizona- "any person required to receive reports may take photographs and medical examinations may include x-rays"; Colorado- "medical and law enforcement personnel and social workers"; Illinois- "anyone required to investigate"; Michigan- "physicians"; Missouri- staff members of medical institutions"; Texas- "physician or dentist"; Virginia- "in any case of suspected child abuse"; Washington- "the law enforcement agency or the department of social and health services."

TABLE B

IMMUNITY FOR REPORTERS

States and Territories	Civil and Criminal Immunity in Making of a Report	Immunity for the Taking of Photographs	Immunity in Resulting Judicial Proceedings	Requirement of Good Faith	Good Faith Presumed
Alabama	X		X		
Alaska	X		X	X	
Arizona	X		X	X	
Arkansas	X	X			X
California	X		X	X	
Colorado	X	X	X		X
Connecticut	X			X	
Delaware	X		X	X	
District of Columbia	X		X	X	
Florida	X		X		X
Georgia	X		X	X	
Hawaii	X		X	X	
Idaho	X		X	X	
Illinois	X	X	X		X
Indiana	X		X	X	
Iowa	X		X	X	
Kansas	X		X	X	
Kentucky	X		X	X	
Louisiana	X		X	X	
Maine	X		X		X
Maryland	X		X	X	
Massachusetts	X			X[2]	X
Michigan	X	X[1]			X
Minnesota	X			X	
Mississippi	X		X		X
Missouri	X	X	X	X	
Montana	X		X		X
Nebraska	X		X	X	
Nevada	X		X	X	
New Hampshire	X		X	X	
New Jersey	X		X	X	
New Mexico	X		X		X
New York	X	X			X
North Carolina	X		X	X	
North Dakota	X			X[2]	X
Ohio	X		X		
Oklahoma	X		X	X	
Oregon	X		X	X	
Pennsylvania	X	X	X	X[2]	X
Rhode Island	X		X	X	
South Carolina	X		X	X	
South Dakota	X		X	X	
Tennessee	X				X
Texas	X		X	X	
Utah	X		X	X	
Vermont	X		X	X	
Virginia	X		X	X	
Washington	X		X	X	
West Virginia	X	X[3]		X	
Wisconsin	X		X	X	
Wyoming	X		X	X	
America Samoa	X	X		X[2]	X
Guam	X			X	
Puerto Rico	X				
Virgin Islands	X	X[4]		X	

Numbers refer to explanatory notes in Appendix A.

TABLE C

AUTHORITY TO TAKE X-RAYS AND PHOTOGRAPHS

States and Territories	Photographs	X-Rays	Notify of or forward to Child Protective Service	Taken at Public Expense
Alabama				
Alaska				
Arizona	X	X		
Arkansas	X	X	X	X
California				
Colorado	X	X	X	
Connecticut				
Delaware				
District of Columbia				
Florida				
Georgia				
Hawaii				
Idaho				
Illinois	X	X		X
Indiana				
Iowa	X	X	X	X
Kansas				
Kentucky				
Louisiana				
Maine				
Maryland				
Massachusetts				
Michigan	X	X	X	
Minnesota				
Mississippi				
Missouri	X	X	X	X
Montana				
Nebraska				
Nevada				
New Hampshire				
New Jersey	X	X	X	
New Mexico				
New York	X	X	X	X
North Carolina				
North Dakota				
Ohio	X	X		
Oklahoma				
Oregon				
Pennsylvania	X	X	X	
Rhode Island				
South Carolina				
South Dakota				
Tennessee				
Texas		X		
Utah				
Vermont				
Virginia	X	X		
Washington	X			
West Virginia	X	X	X	X
Wisconsin				
Wyoming				
America Samoa	X	X	X	X
Guam				
Puerto Rico				
Virgin Islands	X	X	X	X

TABLE D

ABROGATION OF PRIVILEGED COMMUNICATIONS

States and Territories	All Privileges	Physician Patient	Husband–Wife	Any Similar Privileges	All But Attorney–Client	Social Workers	Psycho-Therapist–Patient Privileges	Ministers	Other[1]
Alabama					X				
Alaska		X	X						
Arizona		X	X		X	X			X
Arkansas		X	X		X			X	X
California									
Colorado		X	X						
Connecticut			X						
Delaware		X	X		X	X			X
District of Columbia[2]		X	X						
Florida			X		X		X		
Georgia									
Hawaii		X	X						
Idaho		X	X		X			X	X
Illinois	X	X							
Indiana		X	X						
Iowa		X	X						
Kansas		X		X					
Kentucky			X		X				
Louisiana		X	X		X			X	X
Maine									
Maryland		X				X			X
Massachusetts			X				X		X
Michigan					X				
Minnesota		X	X						
Mississippi									
Missouri					X				
Montana		X		X					
Nebraska		X	X						
Nevada		X	X					X	X
New Hampshire					X				
New Jersey		X	X	X		X			
New Mexico		X		X					
New York		X	X	X		X			
North Carolina		X	X						
North Dakota			X		X				
Ohio		X							
Oklahoma		X		X					
Oregon		X	X		X				
Pennsylvania		X	X		X				X
Rhode Island			X		X				
South Carolina[3]		X	X						
South Dakota		X	X				X		X
Tennessee			X				X		
Texas					X				
Utah		X							
Vermont									
Virginia		X	X						
Washington		X					X	X	
West Virginia			X		X				
Wisconsin		X	X						
Wyoming		X	X						
America Samoa		X	X		X			X	X
Guam		X		X					
Puerto Rico									
Virgin Islands			X		X				

Numbers refer to explanatory notes in Appendix A.

cluded in 33 jurisdictions. Another 14 abrogate the physician-patient privilege by excluding "all" or "all other privileges except the attorney-client privilege." Some remaining jurisdictions exempt physicians by inference, such as "any privilege... provided for by professions or code of ethics."

Explicit restrictions on the husband-wife privilege are found in more than 30 jurisdictions. Another 12 states restrict the husband-wife privilege by inferences such as exclusion of "all" privileges, "all other privileges except attorney-client," or "any similar privilege or rule against disclosure."

Four states include a specific exclusion of the confidential communications privilege for social workers. Five states explicitly restrict the minister-penitent and psychotherapist-patient communications privilege. Eight jurisdictions cite several privileges abrogated and conclude by waiving "any privilege...provided for by professional person and his client...or by professional code."

Religious Immunity or Exclusion

The religious immunity or spiritual healing exemption has been the subject of widespread legislative activity. In its modern form, the clause qualifies a statutory definition of neglect or maltreatment:

> ...any child who does not receive specified medical treatment by reason of the legitimate practice of the religious belief of said child's parents, guardian, or others legally responsible for said child, for that reason alone, shall not be considered to be an abused or neglected child...
> MO. REV. STAT. § 210.115 (3) (Supp. 1976)

Despite some commentators' characterization of these clauses as an impediment to the protection of children,[10] legislative adoption of the clause has increased from 11 jurisdictions in 1974 to 39 states and the District of Columbia today. They are:

Alabama	Michigan
Alaska	Minnesota
Arizona	Mississippi
Arkansas	Missouri
California	Nevada
Colorado	New Hampshire
Connecticut	New Jersey
Delaware	New York
District of Columbia	Ohio
Florida	Oklahoma
Georgia	Oregon
Hawaii	Pennsylvania
Idaho	Rhode Island
Illinois	South Dakota
Indiana	Utah
Kansas	Vermont
Kentucky	Virginia
Louisiana	Washington
Maine	West Virginia
Massachusetts	Wyoming

Three states, Arizona, Connecticut and Washington, limit the exception to Christian Science practitioners.

In an attempt to balance the conflict between the parents' right to religious freedom and the child's right to live, some states have modified the clause. Alabama, Kansas, Kentucky, Michigan, Missouri and Rhode Island, for example, explicitly authorize courts to order medical treatment when the child's health requires it.[11] Even without explicit statutory authorization, a court might still have the power to authorize necessary medical treatment.

Penalty for Failure to Report

While it is generally maintained that complete reporting ultimately rests with the concerned response of the community, an additional motivation for reporting abuse and neglect is the penalty provision. At this writing the following 43 jurisdictions impose a criminal penalty for failure to report:

[10] See e.g., De Francis, *Child Abuse Legislation in the 1970's*, p. 17.

[11] For appellate court decision summaries in cases involving parental refusal to provide medical care see: E.W. Browne and L. Penny, *The Non-Delinquent Child in Juvenile Court: A Digest of Case Law* (Reno, Nevada: National Council of Juvenile Court Judges, 1974) pp. 9-13.

Alabama	New Mexico
Arizona	New York
Arkansas	North Dakota
California	Ohio
Colorado	Oklahoma
Connecticut	Oregon
Delaware	Pennsylvania
Florida	South Carolina
Georgia	South Dakota
Indiana	Tennessee
Iowa	Texas
Kansas	Utah
Kentucky	Vermont
Louisiana	Virginia
Maine	Washington
Michigan	West Virginia
Minnesota	Wisconsin
Missouri	American Samoa
Nebraska	Guam
Nevada	Puerto Rico
New Hampshire	Virgin Islands
New Jersey	

Failure to report is generally a misdemeanor. The typical penalties range from a low of 5 to 30 days in jail and/or a $10 to $100 fine to as high as 6 months to a year and $500 to $1,000, or both. The basis of liability giving rise to a penalty is most often expressed in state law as a "knowing" or "willful" failure to report. Despite the widespread provision for penalties, there are no reported cases of a criminal prosecution for failure to report an abused or neglected child.

Another force for the encouragement of complete reporting is the exposure of mandated reporters to civil liability for damages proximately caused by their failure to report. Five jurisdictions, Arkansas, Colorado, Iowa, New York and American Samoa, provide for civil liability, in addition to providing a criminal penalty. Michigan's statute provides for civil liability only. California's reporting law includes no such provision.

The most celebrated case of civil liability for failure to report is a 1976 California Supreme Court decision,[12] which held that a doctor who fails to report a child abuse victim can be exposed to liability for subsequent injuries to the child on a theory of medical malpractice. The case involved an 11-month-old girl. She was released by the defendant doctor to her parents after an examination, despite signs of brutality evidenced by unexplained fractures, bruises and lacerations. The court held that whether a physician's required standard of care included properly diagnosing and treating the battered child syndrome was a question to be decided by expert testimony and not as a matter of law.[13] The issue of whether the intervening injuries were reasonably forseeable by a prudent physican was held to be a fact to be decided from trial testimony.[14]

Another California case, resulting in a $600,000 settlement, arose when a father brought an action on behalf of his 3-year-old son who had suffered permanent brain damage after repeated beatings by the custodial mother's boyfriend. The child was allegedly examined by four doctors before he was reported as a battered child.[15]

Severability

At least six states have a severability or separability clause in their reporting law. The clause is a "standard section that prevents the entire Act from being declared void should any individual section of it or application thereof be deemed illegal or unconstitutional."[16] New York's, a typical example, reads:

> If any provision of this title or the application thereof to any person or circumstances is held to be invalid, the remainder of the act and the application of such provision to other persons or circumstances shall not be affected thereby.[17]
> N.Y. SOC. SERV. LAW §428 (McKinney 1975)

The inclusion of this subject reflects a maturation in the enactment of child abuse and neglect laws.

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[12] *Landeros v. Flood*, 17 Cal.3d 399, 551 P.2d 389, 131 Cal. Rptr. 69 (1976).

[13] The court also decided that the "battered child" was a recognizable medical condition.

[14] See generally, J.N. Clymer, "The Battered Child-A Doctor's Civil Liability for Failure to Diagnose and Report," *Washburn Law Journal* 16 (Winter 1977): 543-551; N.J. Lehto, "Civil Liability For Failing to Report Child Abuse," *Detroit College of Law Journal* (Spring 1977): 135-166; W.T. Curran, "Failure to Diagnose Battered-Child Syndrome," *New England Journal of Medicine* 296 (April 7, 1977): 795-796.

[15] *The Capital Times*, November 1, 1972, p. 16.

[16] *Model Child Protection Act With Commentary*, draft, August 1977, p. 104.

[17] Others include: Idaho, Massachusetts, New Jersey, Rhode Island and Washington.

III. ROLE OF PROTECTIVE SERVICES AGENCY

Reporting Procedures

Table E illustrates the various procedures that mandated and permissive reporters are mandated to follow. Nearly all jurisdictions require immediate action in reporting. The breakdown of procedures in the jurisdictions is: 27 require oral reports to be followed by written reports; 4 merely require oral reports; 3 allow the reporter to choose between oral or written reports; and 6 require reports, but do not specify the procedure in the reporting law.

Oral reports are to be made "immediately," "promptly," or "as soon as possible." The time within which written reports shall follow oral reports ranges in time from 24 hours to 7 days.

States vary somewhat on the required contents of the report. Typically, the reporter is required to state, if known, the names and addresses of the child and his parents or person having custody of the child and the nature and extent of the child's injuries, including evidence of previous injuries or neglect. A commonly used catch-all phrase reads: "Any other information that the person making the report believes may be helpful in establishing the cause of the injury...and protecting the child."

Many states require that the reporter make an accusatory report or name the person allegedly responsible for the harm. Others, such as Connecticut and Hawaii, avoid a direct mandate to name the suspected perpetrator by requiring the reporter only to name the "person responsible for the care of the child, if available." Some, such as Arkansas and Colorado, require both.

To facilitate oral reporting, many local communities and states have established toll-free, 24 hour-a-day reporting hotlines. A number of states established these hotlines through legislation.[18] The hotline simplifies the reporting procedure and provides a trained person to receive the call.

A trend has developed in which the statutes designate a single agency responsible for the receipt and subsequent investigation of reports of child abuse and neglect. Most states now require that reports be made directly to the local or state social services department. In 1974, 13 states named a department of social services to be the sole receiver of reports.[19] More than 25 currently name the social services department as the sole receiver. A few continue to require reports to be made to law enforcement agencies, or allow reporters to choose between 2 or more agencies.

Mandated Action

The majority of state laws require the agency receiving the report of abuse or neglect to initiate an investigation, "immediately," "promptly," or "within 48 hours" and to take appropriate action to protect the child.

A major element of the investigation, of course, is a determination of whether there is *probable cause* to believe or some other basis for believing that the subject of the report is abused or neglected. Expressions of a discernible standard to determine the validity of a report vary somewhat from state to state. Some states, such as Colorado, Florida, Louisiana, Massachusetts and Tennessee, require "a reasonable belief." Other jurisdictions, such as Arkansas, New York and American Samoa, determine a report's validity by production of "some credible evidence."

Many states, such as Arkansas and Colorado, authorize the investigation to include a visit to the child's home, a physical examination of the child, and an interview with the child. If admission to the child's place of residence cannot be obtained, many state laws specifically authorize the court with juvenile jurisdiction, upon good cause shown, to order the person responsible for the child's care to allow the interview, examination, and investigation. A police officer might be able to get a warrant to "seize" the child as evidence of a crime (e.g., abuse, assault, endangering the welfare of a minor).

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[18] For example: Arkansas, Colorado, Iowa, Mississippi, Missouri, New Jersey, New York, Pennsylvania, Virginia, West Virginia, American Samoa.

[19] De Francis, *Child Abuse Legislation in the 1970's*, p. 178.

TABLE E

REPORTING PROCEDURE

States and Territories	Orally, Followed By Writing	Time When Writing is Due	As Soon As Possible (ASAP) or Not Specified (NS)	Orally Only	Orally or In Writing	Orally, Then In Writing If Requested	Time When Due, If Requested	Not Specified
Alabama	X		NS					
Alaska								X
Arizona								X
Arkansas						X	48 hours	
California	X	36 hours						
Colorado						X	NS	
Connecticut	X[1]	72 hours						
Delaware						X	NS[2]	
District of Columbia	X		ASAP					
Florida	X		ASAP					
Georgia						X	NS	
Hawaii	X		ASAP					
Idaho								X
Illinois	X	24 hours						
Indiana								X
Iowa	X[3]	48 hours						
Kansas						X	NS	
Kentucky						X	48 hours	
Louisiana	X	5 days						
Maine						X	48 hours	
Maryland	X	48 hours						
Massachusetts	X	48 hours						
Michigan	X	72 hours						
Minnesota	X		ASAP					
Mississippi	X		ASAP					
Missouri	X	48 hours						
Montana								X
Nebraska	X		NS					
Nevada	X		ASAP					
New Hampshire						X	48 hours	
New Jersey								X
New Mexico	X		ASAP					
New York	X	48 hours						
North Carolina					X			
North Dakota					X	X	48 hours	
Ohio						X	NS	
Oklahoma	X		ASAP					
Oregon				X				
Pennsylvania	X	48 hours						
Rhode Island	X		NS					
South Carolina				X				
South Dakota				X				
Tennessee				X				
Texas	X	5 days						
Utah					X[4]			
Vermont	X	7 days						
Virginia	X		NS					
Washington						X	NS	
West Virginia						X	48 hours	
Wisconsin	X		NS					
Wyoming						X	NS	
America Samoa						X	48 hours	
Guam	X		ASAP					
Puerto Rico								48[5]
Virgin Islands						X	48 hours	

Numbers refer to explanatory notes in Appendix A.

The department is authorized in many states to enlist the cooperation of law enforcement or other state agencies in its investigation or offer of protective services.

Many states, such as Connecticut and Ohio, authorize immediate removal of the child from his surroundings if the investigation shows probable cause to believe the child is in immediate physical danger. If the child abuse or neglect is so serious that criminal prosecution or other action is indicated, the department also is commonly mandated to report its findings to the police or the office of the prosecuting attorney. These aspects of state law are discussed in greater detail in the next chapter.

Investigation of Institutional Abuse and Neglect

Institutional child abuse and neglect generally refers to situations in which the person responsible for a child's welfare is not the biological parent. These include foster homes, private institutions, or government residential facilities. The incidence of child maltreatment in such settings is not insignificant. Many states have attempted to insure that investigations will be independent and thorough when the agency responsible for the investigation is related administratively to the institution in which the alleged harm took place. A number of states have incorporated clauses into their legislation to insure independence in investigations.[20] Other states have adopted administrative procedures to implement this standard. Examples of the language used in the laws are:

> ...any report under this Act shall be to an agency other than the agency, institution, or other facility involved in the acts or omissions and other than an agency which supervises, governs, or directs the affairs or any institution or facility, involved in the acts or omissions.
> UTAH CODE ANN. § 55-16-3 (Supp. 1975)

> If an employee of the local department is suspected of abusing or neglecting a child, the report shall be made to the juvenile and domestic relations court or the county or city where the abuse or neglect was discovered...
> VA. CODE § 63.1-248.3 (A) (Supp. 1976)

Central Registry

In 1970, 19 states had established a central registry of reported cases of child abuse and neglect. By 1973, 33 states had established a central registry.[21] At this time, the following 41 jurisdictions have legislatively provided for a central registry system:

Alabama	Nevada
Alaska	New Hampshire
Arizona	New Jersey
Arkansas	New York
California	North Carolina
Colorado	Ohio
Connecticut	Oklahoma
Delaware	Oregon
Florida	Pennsylvania
Hawaii	Rhode Island
Idaho	South Carolina
Illinois	South Dakota
Iowa	Tennessee
Louisiana	Texas
Maryland	Vermont
Massachusetts	Virginia
Michigan	Washington
Mississippi	Wyoming
Missouri	American Samoa
Montana	Guam
Nebraska	

In addition, another 7 jurisdictions maintain a centralized record of child abuse reports as a matter of administrative policy.[22] Most central registers are maintained by the state department of social services.

Information on incidents of suspected child abuse and neglect has the potential to assist medical and protective service personnel in the proper diagnosis of maltreatment and in evaluating the extent of danger to a child. Follow-up information can provide a record of how cases are handled and allow a focus on the effectiveness of protective services. As a source of research data, the register can help determine the extent of child abuse and neglect, as well as aid in evaluating the

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[20] Examples include: Alabama, Florida, Georgia, Michigan, Nevada, Oklahoma, Pennsylvania, Utah, Vermont, Virginia, West Virginia, Puerto Rico and the Virgin Islands.

[21] De Francis, *Child Abuse Legislation in the 1970's*, pp. 13, 18, 178.

[22] *Child Abuse and Neglect in the States: A Digest of Critical Elements of Reporting and Central Registries*, (Denver: Child Abuse and Neglect Project, Education Commission of the States, March 1976), pp. 15-21.

impact of various treatment efforts on behalf of the child and the family.

Proponents of the central registry, however, acknowledge the widespread failure of these systems in fulfilling their "diagnostic, case monitoring and statistical function."[23] Insufficient staffing and office space, as well as inefficient methods of relaying reports to the registry both play roles in this failure.

Confidentiality and Access to Records

In addition to operational problems, the potential for infringement of privacy in central registry operations is ever-present, despite efforts to keep registry information current and accurate. This risk often is compounded by a failure to inform the subjects of reports of the existence of the file or its contents.

In response to privacy considerations, most states have a provision in their laws declaring the confidential nature of records. This trend has gained added impetus because of the Federal Act's eligibility criteria provision for methods "to preserve the confidentiality of all records."[24]

A majority of states also have legislated penalties for any breach of the confidentiality of records, a Federal requirement in order for a state to qualify for grants. The offense is typically a misdemeanor and punishable by fine, imprisonment, or both. Some states, such as Florida, Iowa and West Virginia specifically include provisions imposing civil liability for damages resulting from a breach of the confidentiality of records.

One common approach to the confidentiality issue is for state law to authorize the department of social services to regulate entry, retention and access to records. Another approach is to enumerate in the statute those parties with authorization to see records. While this varies from state to state (although most states' exceptions to confidentiality are consistent with Federal regulations) those commonly specified include physicians or persons authorized to place a child in protective custody when such persons have before them a child whom they reasonably suspect may be abused or neglected. Any duly authorized agency having responsibility for the care or supervision of a subject of a report also is commonly granted access.

Due to the potential research value of registry information, access to researchers has not been overlooked, but specific authorization usually is narrowly confined. For example:

> any appropriate state legislative committee responsible for child protective legislation; and (h) any person engaged in bona fide research purpose, provided, however, that no information identifying the subjects of the report shall be made available to the researcher unless it is absolutely essential to the research purpose and the state board of social welfare gives prior approval.
> N.Y. SOC. SERV. LAW § 422 (g) (1976)

A growing number of statutes also make provision for sealing, amending and expunging registry records. Sealing records means merely closing them by putting them in a sealed binding or in a locked file. Sealed records are not destroyed so that there is the possibility that they may be unsealed at a later time. Expunction is the physical erasure or obliteration of information. This material cannot be retrieved later although the document or file from which the information was removed often survives. Amending a record is the adding or subtracting of information in a file in light of new information or corrections brought to the attention of the agency responsible for maintaining the files.

Education and Training

"Ultimately," according to the Model Act commentary, "the key to more effective prevention, identification, and treatment of child abuse and neglect...is the support of an informed and aware citizenry and the capable efforts of concerned professionals."[25]

A growing number of jurisdictions have endorsed this approach by legislatively mandating state or local agencies to operate publicity and education programs for the public, staff personnel,

[23] D.J. Besharov, "Putting Central Registers to Work," *Children Today* 6 (September-October 1977): 9-13.

[24] Pub. L. No. 93-247, Jan. 31, 1974, Section (4)(b)(2)(F).

[25] *Model Child Protection Act With Commentary*, draft, August 1977, Section 26, p. 103.

persons required to report, and others.[26] Section 4(b)(2) of the Federal Act describes such provisions for the dissemination of information as an essential of its eligibility criteria.

Child abuse intervention and treatment efforts increasingly have included professional teams representing social service, medical, legal, and other disciplines. These multidisciplinary crisis teams are involved in the diagnosis, identification, prevention and treatment of child abuse and neglect, as well as education. States also have begun to mandate legislatively or encourage the creation of multidisciplinary teams.[27]

[26] For example: Georgia, Iowa, Kentucky, Michigan, Missouri, New York, Pennsylvania, South Dakota, Virginia, West Virginia, American Samoa and the Virgin Islands.

[27] For example: Colorado, California, Michigan, Missouri, Pennsylvania, Rhode Island and Virginia.

IV. JUDICIAL PROCEEDINGS

Protective Custody

An earlier chapter discussed the measure found in some state reporting laws which grants the right of entry to persons investigating abuse and neglect reports where the investigator is denied entry to the child's home. There also are measures relating to the emergency removal of children without parental consent or decree of the court in order to protect the child from further abuse or injury.

Most jurisdictions authorize police to remove from the home a child in imminent danger of extreme abuse. A growing number of states now extend this protective custody power to child protection agencies.[28]

A growing number of jurisdictions also extend protective custody powers to hospitals when the physician believes it is necessary to retain the child in order to protect him from further injury.[29] Here the authorization limits the custodial period from 24 to 72 hours or until the next session of a family or juvenile court.

Many states limit the circumstances in which a child can be placed in protective custody without a court order. These states require that authorized persons have reasonable cause to believe the child is in imminent danger and that there is not time to secure a court order. Similar limitations are imposed by the Fourth Amendment to the Constitution which prohibits unreasonable seizures.

Those persons applying for a court order prior to removal of a child must establish that immediate harm may occur to a child unless the court issues the order. These restrictions attempt to balance the right of the parents and the welfare of the child. The issue of parental rights versus the welfare of the child is still a controversial one in child protection law.

Another restriction, which attaches to the protective custody process in a growing number of states, prohibits placing abused or neglected children in any adult detention facility. A growing, but lesser number of states, forbids placing abused or neglected children in any detention facility.

Counsel for the Child or a Guardian Ad Litem

Section 4(b)(2)(G) of the Federal Act requires that states, in order to be eligible for federal grants from The National Center on Child Abuse and Neglect, "provide that in every case involving an abused or neglected child which results in a judicial proceeding a guardian ad litem shall be appointed to represent the child." The court gives this person the power and the duty to represent the interests of the child in these court proceedings.

Often the interests of the parents and a child conflict in child protection proceedings. It is this built-in conflict which has led some commentators to hold the following view:

> The traditional legal adversary system assumes that the only way to judicial truth is through competing lawyers who each advance his own client's cause with the judge as referee. It is questionable whether such a system can effectively result "in the best interests" of the child if there is no independent counsel for the child. It may be also that, more than merely requiring the appointment of a guardian ad litem for an alleged neglected child, the present procedures must include input from other disciplines for the final decision making. Neglect proceedings require a concerned and compassionate justice which has utilized the findings of social behaviorists and psychiatrists.[30]

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[28] For example: Alabama, Arizona, Arkansas, Colorado, Connecticut, Maryland, Massachusetts, Montana, New Jersey; New York, Texas, Virginia and American Samoa.

[29] For example: Alabama, Arizona, Colorado, Connecticut, Illinois, Kentucky, Michigan, Missouri, New Jersey, New York, North Carolina, North Dakota, Pennsylvania, Rhode Island, Tennessee, Virginia, Washington, American Samoa and the Virgin Islands.

[30] S.N. Katz, R.W. Howe and M. McGrath, "Child Neglect Laws in America," *Family Law Quarterly*, 9 (Spring 1975): 5.

In keeping with this line of thought over one-half of the states provide for the mandatory appointment of a lawyer to represent the child.[31] Section 25 of the Model Act also mandates either independent legal representation or court appointed counsel for children alleged to be abused or neglected. Other states, such as Arkansas, Maine, New Mexico, North Dakota, Ohio and Tennessee, provide for the appointment of a guardian ad litem at the discretion of the court.

Legal Representation for the Parents and Agency

Although the parents' right to counsel is well established in criminal actions stemming from alleged child abuse or neglect, this right to counsel in civil proceedings in juvenile court is not so widely enjoyed. Courts are divided on the legal issues. Nevertheless, over one-half of the states, such as Arizona, California and New Jersey, do provide in their statutes for appointment of counsel for the parents, if they are indigent.

Many commentators feel that child protection agencies are at an unfair disadvantage if they appear in proceedings without counsel, especially if the parents are represented by counsel. In addition, full representation of all parties avoids any inclination by the court to advocate an unrepresented party's interests and confines the court to an unbiased assessment of all the evidence. Some states, such as Florida, Massahusetts and Rhode Island, do require that an attorney assist a child protective services agency appearing in neglect proceedings. Others, such as Arizona, Colorado, and Idaho, leave appointment of counsel to the discretion of the court. Statutes will specify whether the state attorney, local district attorney or the agency's own attorney will represent it in court.

[31] For example: Alabama, Arizona, Connecticut, Idaho, Kentucky, Massachusetts, Michigan, New Jersey, Pennsylvania, South Dakota and Virginia.

V. SUMMARY

State child abuse and neglect law in the last 15 years has been one of the most active areas of legislative adoption and amendment. It is an area which continues to generate activity. As this report documents, similarities between states are at least as great as the differences so often commented on.

Evidence of this legislative activity is reflected in the findings of earlier surveys.[32] Between 1967 and 1970, 27 states and 2 territories passed amendments modifying one or more basic elements of their child abuse and neglect statutes; 18 of these were in the reporting laws. Between 1970 and 1973, 38 jurisdictions enacted substantive amendments. Since the April 30, 1977 date used in this report, more than 20 have amended some characteristic of their reporting laws. More than 20 have enacted amendments to their judicial proceedings and criminal codes. Significant changes have been enacted since April, 1977 in the District of Columbia, Kansas, Mississippi, Montana, North Carolina, Oklahoma and South Carolina, to name a few. The number of jurisdictions having a similar approach to any single feature of child protection laws does not remain static for long.

Similarly, while two years after passage of the Child Abuse and Neglect Prevention and Treatment Act of 1974 only 28 states were eligible to receive state grants under the terms of the Act,[33] by 1977, 39 states, American Samoa, Puerto Rico and the Virgin Islands qualified for grants from the National Center on Child Abuse and Neglect.[34] The fiscal year 1977 total of grants, conditional grants and supplements approach $4 million. National Center grants to eligible states from 1974 to 1977 have reached a total of $8,568,539.

Trends noted in earlier surveys have continued. Most prominent among these is the expansion of the categories of mandated reporters and a broadening of the conception of reportable abuse and neglect. Another trend shows the extension of immunity to reporters and the imposition of criminal and civil sanctions for failure to report. A growing number of states now are directing reports of abuse and neglect to social service agencies and mandating the operation of central registries. Another significant trend in this area is the legislative requirement that a guardian ad litem be appointed by a court to independently represent the best interest of the child in abuse and neglect proceedings. States also have begun through their legislation to mandate or encourage the use of multidisciplinary teams.

The hope of the universal enactment of these elements is to increase reporting of children in peril and to institute more comprehensive services on behalf of the child and family. There are no simple answers, but these steps, identification and treatment, are vital to elimination of child abuse and neglect.

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[32] De Francis, *Child Abuse Legislation in the 1970's*, p. 7.

[33] Ibid., p. 1.

[34] The 12 jurisdictions not yet qualified for federal grants are: Alaska, Arizona, Guam, Idaho, Indiana, Iowa, Maryland, Montana, Nevada, Oregon, Pennsylvania, Wisconsin and Wyoming.

Appendix A

FOOTNOTES FOR TABLES

TABLE A – *Who Reports*

1. Jurisdictions requiring reports of child abuse from "Practitioners of the Healing Arts" imply that all medical professionals must report. If a statute enumerates specific medical professionals, in addition to "practitioners", these were checked in the appropriate column as well. Similarly, some states require reports of abuse from "any person, such as...or including, but not limited to...." In such cases, each party listed was checked as well as the "Any Other Person" column.

2. The following have been designated under both the "Teacher" and "Other School Personnel" column because of the statutes' inference: Arizona, Colorado, Delaware, Iowa, Nebraska and Oregon refer to school personnel or employees; Minnesota refers to "a professional or his delegate who is engaged in the practice of...education."

3. All jurisdictions checked in the "Religious Healing Practitioner" column, except for California and Ohio, refer to Christian Scientists. West Virginia refers to both Christian Scientists and religious healing practitioners.

4. Other specifically named persons not listed by a separate heading in Table A, but required to report include: Alabama – sanitarium; Alaska – health aid, physical therapist and Officers of the Division of Corrections; Colorado – child health associates; Illinois – truant officer, social services administrator and Illinois Department of Public Aid; Kentucky – health professional; Maryland – professional employee of a correctional institution and state trooper; Massachusetts – guidance or family counselor; Michigan – audiologist; Missouri – juvenile officer; New Hampshire – therapist; North Carolina – public health worker; Ohio – speech pathologist or audiologist; Oregon – employee of the Department of Human Resources, county health department, community mental health program, and county juvenile department; Vermont – physician's assistant; Washington – employee of the department of social and health services; and Wyoming – laboratory technician.

TABLE B – *Immunity for Reporters*

1. Michigan's immunity section extends to "assisting in any other requirement of this act," and § 722.626 (1), (2) (Supp. 1976) authorizes physicians to detain endangered children in protective custody and to take x-rays and photographs.

2. Massachusetts, North Dakota, Pennsylvania and American Samoa require good faith of permissive reporters.

3. West Virginia's immunity extends to "any act permitted or required by this article", and § 49-6A-4 authorizes any person required to report to take photographs and x-rays.

4. The Virgin Islands' immunity extends to "any act permitted or required by this chapter," and § 275 authorizes mandatory reporters to take photographs and x-rays; § 176 (a) authorizes police and physicians to take protective custody of children.

TABLE D – *Abrogation of Privileged Communications*

1. The eleven jurisdictions included in the "Other" column are: Arizona and Delaware – any privilege...provided for by professions such as nursing covered by law or a code of ethics regarding practitioner-client confidences...; Arkansas, Idaho, Pennsylvania and American Samoa – any privilege...between any professional person... including...counselors, hospitals, clinics, day care centers, and schools and their clients; Louisiana – any privilege...between any professional person and his client...; Maryland – every health practitioner, educator or...law enforcement officer, who contacts, examines, attends, or treats a child and who believes...the child has been abused is required to make a report...notwithstanding any other section...relating to privileged communications...; Massachusetts – any privilege established...by court decision or by profession code relating to the exclusion of confidential communications and the competency of witnesses...; Nevada – shall not be excluded on the grounds that the matter would be privileged...under chapter 49 of Nevada Revised Statutes (which includes accountant-client, lawyer-client, school counselor and teacher-student)..and the news media privilege...; and South Dakota – elementary or secondary school counselor and student.

2. The District of Columbia excludes the physician-patient and husband-wife privileges..."pro-

vided that the Division determines such privilege should be waived in the interest of public justice."

3. South Carolina excludes the privileged communications between husband and wife in any judicial proceeding, but the privilege between doctor and patient is excluded from the waiver "in the evaluation process."

TABLE E – ***Reporting Procedure***

1. Connecticut – In addition to § 17-38a (c), which is reflected on Table E, Connecticut law has several variations in its reporting procedure: § 17-38b states that "Any of the persons...described in § 17-38a (b) having reasonable cause to believe that any child...is in danger of being abused, but who does not have reasonable cause to suspect any such abuse has actually occurred, shall immediately cause a written report to be made..." And § 17-38a (b) having reasonable cause to believe than any child...has been abused shall immediately cause a written or oral report to be made to the state welfare commissioner..."

2. Delaware – "...in accordance with the rules and regulations of the Division of Social Services...".

3. Iowa – "...Each report made by a mandatory reporter...shall be made both orally and in writing. Each report made by a permissive reporter...may be oral, written, or both...".

4. Utah – "An oral report shall be made as soon as possible by telephone or otherwise and may be followed by a report in writing."

5. Puerto Rico – "...by the quickest means of communication, within a period of not more than 48 hours after the minor's condition is known."

Appendix B

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Appendix C

STATUTE COMPILATION

STATE CHILD ABUSE AND NEGLECT STATUTES*

Alabama – ALA. CODE tit. 27, §§ 20 to 25 (Supp. 1975); tit. 49, § 17 (2), (7) (1958); tit. 13A, §§ 5-101 to -153 (Supp. 1975); tit. 14, §§ 41 (1), 326 (2) (Supp. 1973); tit. 34, §90 (1958).

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Arkansas – ARK. STAT. ANN. §§ 42-807 to -818 (Supp. 1975); § 83-109 (2), (9) (Repl. 1976); § 5-912 (6) (Repl. 1976); §§ 45-401 to -444, -448 (Supp. 1975); ARK. CRIM. CODE §§ 41-2405, -2407, -2408 (1976).

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Colorado – COLO. REV. STAT. §§ 19-10-101 to -115 (Supp. 1975); §§ 19-1-101 to -104, -106, -114 (1974); § 19-2-101 (1974); § 19-3-105 (Supp. 1975); § 19-3-111 (1974); §§ 19-4-101, -102, -103 (1973); § 18-6-401 (1974), amended by § 18-6-401 (7), (8) (Supp. 1976).

Connecticut – CONN. GEN. STAT. ANN. §§ 17-32c, 17-32d, 17-38a, 17-38b, -38e, -39, -40, -53, -54, -59, -62, -66b(b), -66c (Supp. 1976); §§ 17-38b to -38d (1975); §§ 53-20, -21, -23 (1960); § 45-54 (Supp. 1976).

Delaware – DEL. CODE tit. 16, §§ 901 to 909 (Supp. 1976); tit. 31, §§ 301 to 305 (1974); tit. 10, §§ 901, 921 (1)-(9), 922, 924, 925, 932, 933, 936, 937, 940 to 942, 950 (1974), amended by tit. 10, § 950 (Supp. 1976); tit. 11, §§ 1101 to 1104 (1974); Family Court Rule, Rule 60 (a) (1974).

District of Columbia – D.C. CODE ENCYCL. §§ 2-161 to -166 (1973); § 3-116 (1973); §§ 3-114, -117 (Supp. 1976); §§ 16-1001 to -1006, -2301, -2303 to -2305, -2309 to -2311, -2315, -2320, -2331, -2335 to -2337 (1973); § 11-1101 (13) (1973); §§ 22-901 to 903 (1967).

Florida – FLA. STAT. ANN. § 827.07 (1975), amended by § 827.07 (10) (Supp. 1976); § 409.145 (1973), amended by § 409.145 (2) (Supp. 1976); § 828.03 (Supp. 1976); § 39.02 (1974), amended by § 39.02 (4) (Supp. 1975); §§ 39.001, .01 (1), (10), .03, .05 (4), .06, .08, .10, .11 (Supp. 1976); §§ 827.01 to .06 (1975); §§ 75.082, .083, .084 (1976).

Georgia – GA. CODE ANN. §§ 74-111 (Supp. 1977); § 74-9902 (Supp. 1976); §§ 74-108 (3), (6) to -110 (1974); §§ 99-4301, -4302 (1976); §§ 99-202, -203, -209, -211, -214 (1), (m), (n) (1976); §§ 99-903b to -917b (Supp. 1976); §§ 24A-101, -301, -302, -401, -1301, -1401, -1402, -1403, -2001, -2301, -3201, -3301 (1976); § 26-2801 (1972).

Hawaii – HAWAII REV. STAT. §§ 350-1 to -5 (1975), amended by § 350-1 (Supp. 1975); §§ 346-10, -14 (1968); §§ 346-1, -55 (Supp. 1975); §§ 571-1, -2, -11, -13, -14, -31, -32, -41, -48 (Act 85, S.L. 1976); §§ 571-61 to -63 (Supp. 1974); § 571-44 (1968); §§ 709-903 to -904 (Act 198, S.L. 1974); § 551-2 (Supp. 1975).

Idaho – IDAHO CODE §§ 16-1601 to -1605, -1608 to -1610, -1612 to -1621, -1623 to -1625, -1629, -2007 (Supp. 1976), amended by § 16-1605 (Supp. 1977); §§ 56-204A, -204B (1976); § 5-306 (1948); § 18-401 (Supp. 1975); § 18-1501 (Supp. 1977); § 18-403 (Supp. 1976).

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*Statutes include reporting laws, child welfare laws, juvenile court laws and criminal laws in effect on April 30, 1977. State reporting laws also appear at the bottom of pages 4 and 5.

Illinois – ILL. ANN. STAT. ch. 23, §§ 2051 to 2061, 5005, 5035.1 (Smith-Hurd Supp. 1976); ch. 23, §§ 2359, 2361, 2368, 2370 (Smith-Hurd Supp. 1976); ch. 23, § 2360 (Smith-Hurd 1968); ch. 51, § 5.1 (Smith-Hurd Supp. 1976); ch. 37, §§ 702-1, -4; § 703-1; §§ 704-1, -6; §§ 705-7, -9 (Smith-Hurd 1972); ch. 37, §§ 704-2, -5, -8; §§ 705-2, -8, -10 (Smith-Hurd Supp. 1976).

Indiana – IND. CODE ANN. §§ 12-3-4.1-1 to -6 (1973); § 12-1-1-1; § 12-1-2-3; § 12-1-3-4; § 12-1-8-1 (1973); § 12-3-2-14 (1976); § 12-3-3-1 (1973); § 12-3-3-2 (1976); §§ 31-5-7-1, -6, -7, -9, -15, -21 (1973); §§ 31-3-1-6, -7 (Supp. 1975); § 31-5-7-23 (Supp. 1976); §§ 10-811 to -814 (1956); §§ 10-815 to -816b (Supp. 1975); § 9-2809 (1956); §§ 35-46-1-1, -4, -5 (Supp. 1977); Ind. Rules of Trial Procedure 17C (1973).

Iowa – IOWA CODE ANN. §§ 235A.1 to .24 (Supp. 1975); § 238.32 (1969), amended by § 238.32 (2) (Supp. 1975); § 232.48 (Supp. 1976); §§ 232.2, .11 Supp. 1975); §§ 232.7, .15, .28, .41 (1969), amended by § 232.41 (1), (2)(e) (Supp. 1976); § 232.33 (1969), amended by § 232.33 (3)-(5) (Supp. 1976); § 731.1; §§ 731A.1, .3 (1950); §§ 731A.2, .4 (Supp. 1975).

Kansas – KAN. STAT. §§ 38-716, -719 (1973); §§ 38-717, -718, -720 to -723, -802, -806, -815, -819 to -825 (Supp. 1976); § 39-713c (Supp. 1976); §§ 75-5322 to -5324 (Supp. 1974); §§ 21-3604, -3605, -3608, -3609 (1974), amended by § 21-3605 (Supp. 1976).

Kentucky – KY. REV. STAT. §§ 199.011, .335, .990 (7)-(8) (1976 Acts, C. 142, Secs. 1-3); §§ 199.430, .900 (Supp. 1975); § 199.460 (1975); § 194.090 (4), (7) (1975); § 199.600 (1976 Acts, C. 21, Sec. 1); §§ 208.010, .020, .060 (3)(a), .200, .230 (1976 Acts, C. 168, Secs. 1-3, 8, 9); §§ 208.080, .990 (5) (1975); §§ 530.030 to .060 (1975), amended by § 530.050 (1976 Acts, C. 361, Sec. 1).

Louisiana – LA. REV. STAT. § 14:403 A, B (1), (4), C to I (1974); § 14:403 B (2), (3) (Supp. 1976); § 46.65 (Supp. 1976); §§ 13:1569, 1570, 1573, 1575, 1580, 1583, 1600 to 1605 (Supp. 1976); § 13:1578.2 (3 La. Sess. Law Serv. 664-65, 1975); §§ 14:74, 92.1, 93 (1974).

Maine – ME. REV. STAT. tit. 22, §§ 3792, 3793, 3851 to 3860 (Supp. 1975), amended by tit. 22, § 3853 (Supp. 1976); tit. 22, § 3791 (1965); tit. 19, § 218 (1965); tit. 17A, §§ 106, 552 to 554 (Supp. 1976); tit. 19, § 481 (Supp. 1976).

Maryland – MD. CODE ANN. Art. 27, § 35A (1976 Repl. Vol.); Art. 88A, §§ 1, 3, (1975), amended by Art. 88A, § 3 (a), (2) (b), (f), (g) (Supp. 1976); §§ 3-801, -802, -804, -815 (e), -818, -820 to -822, -831 (Cumm. Supp. 1976); Art. 27, §§ 88, 96 (Cumm. Supp. 1975).

Massachusetts – MASS. GEN. LAW ANN. ch. 119, §§ 1, 22 to 26, 29, 51A to 52 (1975), amended by ch. 119, §§ 51A, E, F (Supp. 1976); ch. 119, §§ 39, 39A (1969); ch. 233, §§ 20, 20B (1975); ch. 273, § 1 (Supp. 1976); ch. 28A, §§ 1, 4 (1973).

Michigan – MICH. COMP. LAWS ANN. §§ 722.621 to .636 (Supp. 1976); §§ 400.1, .14 (P.A. 136, May 27, 1976); § 722.532 (1968); §§ 712A.1, .2 (b)(1), (2), .14, .17 (1968); §§ 722.561 to .565 (1968); §§ 712A.15, .18, .19a (Supp. 1975); §§ 750.135, .136, .136a (1968).

Minnesota – MINN. STAT. ANN. § 626.556 (Supp. 1976); §§ 256.01, .12 (9), (14) (1971), amended by §§ 256.01 (2), (6), (8), .12 (10), (15) (Supp. 1976); § 257.175 (1971); § 393.07 (1), (2) (Supp. 1976); §§ 260.011, .015 (1), (2), (4), (6)-(14), .111, .151, .165, .191, .221, .231, .235, .241 (1971), amended by §§ 260.015 (9), (10), .151 (1), .191 (1), .231 (3) (Supp. 1976); § 260.155 (2), (4) (Supp. 1976); § 609.375 (Supp. 1976); § 15.165 (1977).

Mississippi – MISS. CODE ANN. §§ 43-21-3, -5, -11, -17, -27 (Supp. 1976); §§ 43-15-1 to -11 (1973); §§ 43-23-1, -3, -5, -9, -11, -15, -17, -21, -23, -25, -41 (1973); §§ 43-21-7, -13, -19, -23, -25 (1973).

Missouri – MO. REV. STAT. §§ 210.110 to .165 (Supp. 1976); §§ 207.010, .020 (Supp. 1976); §§ 211.011, .021, .131, .441 to .501 (1962); § 211.031 (Supp. 1976); § 211.181 (Supp. 1975); §§ 559.330, .340 (1953); §§ 559.353, .356 (Supp. 1976).

Montana – MONT. REV. CODES ANN. §§ 10-1202, -1203, -1206 (1), -1211, -1300 to -1320, -1322 (Supp. 1975); § 94-5-607 (Supp. 1975).

Nebraska – NEB. REV. STAT. §§ 28-1501 to -1508 (1973), amended by §§ 28-1506 to -1508 (1975); §§ 43-201, -202, -205.06, -208, -209, -210.04 (Supp. 1976); §§ 43-205.01 to -205.03 (1975); § 38-114 (1974); §§ 38-115 to -117 (1975); § 28-477 (1975).

Nevada – NEV. REV. STAT. §§ 200.501 to .508 (1973), amended by §§ 200.501, .5011, .502, .503, .504, .5045, .508 (1975); § 200.504 (1975); §§ 432.100 to .130 (1975); §§ 49.185 to .275 (1975); §§ 422.030, .270 (1975); § 424.105 (1975); §§ 62.010, .020, .030, .040, .043, .085, .170, .200 (1975); §§ 128.010 to .140 (1975); §§ 201.020, .090 to .110 (1975).

New Hampshire – N.H. REV. STAT. ANN. §§ 169:1, 2, 7, 10 (I), (IV), 10a, 13, 37 to 45 (Supp. 1975); § 161:2 (Supp. 1975); § 604-A:1-a (1973); § 462:1 (1968).

New Jersey – N.J. STAT. ANN. §§ 9:6-8.8 to .73 (1976); §§ 9:6-1, -1.1, -2 to -8 (1976); §§ 9:12-1, -2 (1976).

New Mexico – N.M. STAT. ANN. §§ 13-14-14.1, .2 (1976); §§ 13-1-3, -4, -39, -40 (1976); §§ 13-14-1, -2, -3, -9, -10, -16, -20, -21, -22, -23 (C), -24, -25 (E to H), -28, -31, -34, -35, -38, -39 (Repl. Vol. 1976); §§ 13-14A-1, -40 to -47 (Supp. 1976); § 40A-6-1 (Supp. 1975).

New York – N.Y. SOC. SERV. LAW §§ 371, 397, 398, 411 to 428 (McKinney 1975), amended by §§ 371 (1), (2), 398 (1), (2), (6f), (6n), 422 (4) (McKinney Supp. 1976); N.Y. FAM CT. ACT §§ 113, 115, 617 (a), (b), 626, 632, 633, 1011 to 1074 (McKinney 1975), amended by §§ 1024 (b), 1031 (d) (McKinney Supp. 1976); §§ 249, 611, 614, 616, 617 (c), (d), 622, 623, 624, 625, 631, 634 (McKinney Supp. 1976); N.Y. PENAL LAW §§ 260.00, .15 (McKinney 1967); §§ 260.05, .10, .11 (McKinney Supp. 1975).

North Carolina – N.C. GEN. STAT. §§ 110-116 to -122 (1975), amended by §§ 110-117 (1), (4), -118 (d) (Supp. 1975); § 108-19 (14), (15) (1975); §§ 7A-278, -284, -288 (1969), amended by § 7A-278 (1) (Supp. 1975); §§ 7A-277, -279, -285, -286 (Supp. 1975); §§ 14-316.1, -318.2 (Supp. 1975); §§ 14-322, -322.1 (1969).

North Dakota – N.D. CENT. CODE §§ 50-25.1-01 to -14 (Supp. 1975), amended by §§ 50-25.1-02, -08 (Supp. 1977); §§ 27-20-01 to -03, -13, -14, -16, -26, -30, -44, -48 (1974), amended by § 27-20-02 (1), (10) (Supp. 1975); § 14-09-22 (Supp. 1975).

Ohio – OHIO REV. CODE ANN. §§ 2151.03, .031, .04, .05, .07, .23, .27, .281, .31, .311, .312, .35, .352, .353, .359, .36, .41, .421, .99, (Page Repl. Vol. 1976); § 5153.16 (Page Repl. Vol. 1976); § 5153.18 (Page 1970); §§ 2919.21, .22 (Page 1975); § 2947.25 (Page 1975).

Oklahoma – OKLA. STAT. ANN. tit. 21, §§ 845 to 848 (Supp. 1976); tit. 10, §§ 24, 1101, 1101B, 1102, 1104, 1107, 1109, 1116, 1117, 1120, 1128, 1130, 1135, 1136, 1204, 1404 (f) (Supp. 1976).

Oregon – OR. REV. STAT. §§ 418.005, .010, .015, .740 to .775, .990 (6)-(7) (Repl. Part 1975); §§ 419.472, .476, .494, .498 (2), .507, .509, .511, .513, .515, .523, .525, .527 (Repl. Part 1975); §§ 163.535, .545, .555 (Repl. Part 1975).

Pennsylvania – PA. STAT. ANN. tit. 11, §§ 2201 to 2224 (Supp. 1976); tit. 71, § 1473 (1)(d) (1962); tit. 42, §§ 6301 to 6304, 6321, 6323, 6324, 6337, 6351 (Supp. 1976); tit. 18, §§ 4304, 4321 (1973).

Rhode Island – R.I. GEN. LAWS §§ 40-11-1 to -16 (Supp. 1976); § 15-7-7 (Supp. 1976); §§ 14-1-1 to -3, -5, -8, -9, -22, -58, -59 (1970), amended by §§ 14-1-3 (H), -34, -35 (Supp. 1976); § 11-9-5 (1970).

South Carolina – S.C. CODE ANN. ch. 9, §§ 20-9-10 to -70 (1976), amended by § 20-9-20 (a) (Supp. 1976); ch. 11, §§ 43-11-10 to -100 (1976); ch. 15, §§ 43-15-80, -90 (1976); ch. 17, §§ 43-17-10 to -50 (1976); ch. 21, §§ 14-21-10, -20, -30, -510, -550, -560, -590, -610, -620, -810, -820, -830, -840 (1976); ch. 11, §§ 20-11-10 to -60 (1976); ch. 7, §§ 20-7-10 to -40 (1976).

South Dakota – S.D. COMPILED LAWS ANN. §§ 26-10-1, -1.1, -10 to -12.3, -14, -15 (1976), amended by § 26-10-15 (Supp. 1977); §§ 19-2-3.1, 19-2-5.1 (1977); § 19-2-1, -3 (1976); §§ 26-4-7, -9 (1976); §§ 26-8-1, -1.1, -6, -19.1, -19.2, -19.3, -22.10, -22.12, -30, -35, -36, -40.6, -48, -59 (1976); §§ 26-9-1 to -17 (1976).

Tennessee – TENN. CODE ANN. §§ 37-101, -201, -202, -203, -213, -216, -228, -230, -248, -1201 to -1212 (1977 Repl. Vol.); § 14-105 (1973), amended by § 14-105 (F) (Supp. 1974); §§ 39-202, -204, -217, -1019 (1975).

Texas – TEX. FAM. CODE ANN. §§ 34.01 to .06 (1975), amended by §§ 34.02, .05, .07, .08 (Supp. 1976); § 35.04 (Supp. 1976); §§ 11.01, .02, .11 (1975), amended by §§ 11.01, .10, .11 (Supp. 1976); §§ 17.01, .05 (Supp. 1976); §§ 15.02, .05 (Supp. 1976); § 51.11 (1975); TEX. REV. CIV. STAT. ANN. art. 695a (1964), amended by art. 695a (Supp. 1976); art. 695c, § 4 (Supp. 1976); TEXAS PENAL CODE ANN. § 9.61 (1974); § 22.04 (1974).

Utah – UTAH CODE ANN. §§ 55-16-1 to -7 (Supp. 1975); § 55-15a-26 (Repl. Vol. 1974); § 55-15b-19 (Repl. Vol. 1974); §§ 55-15b-2 to -6 (1973), amended by §§ 55-15b-2 (4), (17), -6 (10), -7 (Supp. 1975); §§ 55-10-64, -80 to -82, -89, -90, -97, -109 (1974); §§ 55-10-77, -99, -100 (Supp. 1975); UTAH R. CIV. PROC. 17(b), 17(c) (1953).

Vermont – VT. STAT. ANN. tit. 13, §§ 1351 to 1356 (Supp. 1976); tit. 13, §§ 1304, 1305 (1973); tit. 33, §§ 631, 632, 633, 638, 639, 653, 656, 2592 to 2595, 2751, 2801, 2851 (Supp. 1976).

Virginia – VA. CODE §§ 63.1-248.1 to .17 (Supp. 1976); § 63.1-53 (Supp. 1976); § 63.1-126 (Repl. Vol. 1973); §§ 16.1-141, -158, -166, -173, -178, -196 (1975); § 40.1-103 (1976); § 20-61 (1975).

Washington – WASH. REV. CODE ANN. §§ 26.44.010 to .900 (Supp. 1975); § 5.60.060 (3), (4) (Supp. 1976); § 18.83.110 (Supp. 1976); §§ 74.13.020, .031 (Supp. 1976); §§ 13.04.010 (3), (12), .060, .100, .110, .170 (1962); § 13.04.095 (Supp. 1976); § 26.20.030 (Supp. 1975).

West Virginia – W. VA. CODE §§ 49-6A-1 to -10 (S.B. No. 200, April 5, 1977); § 49-7-1 (S.B. No. 200, April 5, 1977); §§ 49-2-1 to -3 (1975); § 49-2-16 (1975); §§ 49-1-1 to -5 (S.B. No. 200, April 5, 1977); § 49-2-14 (S.B. No. 200, April 5, 1977); § 49-5-4 (1975); §§ 49-5-2, -8 (a), (b), -13 (b)(4) (S.B. No. 200, April 5, 1977); §§ 49-6-1 to -8 (S.B. No. 200, April 5, 1977); § 61-8-24 (1976).

Wisconsin – WIS. STAT. ANN. §§ 905.04 (4)(e), .05 (1), (2), (3)(b) (1975); § 48.981 (Supp. 1976); §§ 46.001, .011, .03 (7), .22 (4), (5)(g) (Supp. 1976); §§ 48.06, .07, .57 (Supp. 1976); §§ 48.56, .78 (1957); §§ 48.01, .02, .13, .14, .25 (5), (6), .28, .35, .40 to .45, .425 (1973), amended by §§ 48.35, .41, .44 (Supp. 1976); §§ 52.05, .055 (1973); § 940.201 (Supp. 1976).

Wyoming – WYO. STAT. §§ 14-28.7 to .13 (Supp. 1975); §§ 42-2 (a), -19 (a), (c), (d), -44 (c) (Supp. 1975); §§ 14-116 to -121 (Supp. 1975); §§ 14-29, -32, -40, -53, -56, -57, -58 (1965); §§ 14-115.2, 4, .6 to .10, .17, .23, .25, .30 (a), .31, .42 (Supp. 1975); §§ 14-21 to -26 (1965).

American Samoa – A.S. CODE tit. 21, ch. 29, §§ 2901 to 2914 (P.L. 15-22, February 25, 1977); tit. 15, ch. 13, § 203 (1973); tit. 15, ch. 95, § 1022 (1973).

Guam – GUAM PENAL CODE §§ 273 (d), 273(e) (Supp. 1974); §§ 270 to 273a (1970); GUAM GOV'T. CODE §§ 9115, 9118, 9119 (1970), amended by § 9115 (b), (c) (Supp. 1974); GUAM CODE CIV. PRO. §§ 250, 251, 252, 254, 258 to 263, 265 to 269 (1970); GUAM CIV. CODE §§ 203, 204 (1970); GUAM PENAL CODE §§ 270 to 273a (1970).

Puerto Rico – P.R. LAWS ANN. tit. 3, §§ 211 b, d, m-r (Supp. 1975), amended by Act No. 104 of 1976, Secs. 1-8; tit. 8, §§ 21, 24 (1971); tit. 34, §§ 2001, 2002, 2005, 2007, 2010, 2013 (1971); tit. 34, §§ 2101 to 2106 (Supp. 1975); tit. 33, §§ 4241, 4242 (Supp. 1975); tit. 31, § 634 (Supp. 1975).

Virgin Islands – V.I. CODE ANN. tit. 19, §§ 171 to 176 (Supp. 1975), amended by §§ 171 to 183 (1976 Act No. 3825, 11th Legislature, Sec. 1); tit. 3, §§ 371, 384 (1967); tit. 34, §§ 1, 2, 101, 102 (1967); tit. 4, §§ 171 to 173 (1967); tit. 5, §§ 2501 to 2513 (1967), amended by §§ 2505, 2506, 2511 (Supp. 1975); tit. 14, § 481 (a) (1964); tit. 14, § 481 (b) (Supp. 1975); tit. 15, § 827 (1964); tit. 3, ch. 25, § 533 (1976 Act No. 3825, 11th Legislature, Sec. 2).

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